# RHODE ISLAND DEPARTMENT OF HUMAN SERVICES EARLY INTERVENTION STATE ANNUAL PERFORMANCE REPORT

## **FEBRUARY 2009**

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#### **Overview of the Annual Performance Report Development:**

In accordance with 20 U. S. C 1416(b)(1) of the Individuals with Disabilities Education Improvement Act (IDEA) amendments of 2004 and 20 U. S. C. 1442 Rhode Island Part C program developed a State Performance Plan which was approved by the US Department of Education (US DE) in 2006. In accordance with 20 U. S. C. 1416(b)(2)(C)(ii) and 1442, the RI Department of Human Services, as the lead agency for Part C of IDEA in RI, is submitting this FFY 2007-08 Annual Performance Report.

In addition to the family survey for indicator #4, there were two main sources of data used for this APR. The web based data collection system called the Rhode Island Early Intervention Care Coordination System (RIEICCS) was used to report statewide data for Indicators 2, 3, 5 & 6 as required by OSEP. The state also used focused monitoring data for indicators 1, 7, 8 and 9 from local providers' self-assessment data, which was verified by the State for reliability and accuracy. An annual self-assessment is required and assists providers in conducting internal quality reviews to ensure accuracy and reliability of their data and compliance to State and Federal requirements. By reviewing records internally, providers can analyze the root cause of any non-compliance and begin to take corrective action soon as possible. The State performed an on-site visit for any provider who fell below 95% compliance in any of the compliance indicators and/or if any data looks inconsistent from the data reported in RIEICCS. All providers received an on-site visit this year.

The Department of Human Services shared and reviewed all APR data at the monthly EI Association Meeting on January 8, 2009. Data reports included data for all indicators for each of the local EI providers for each year of the State Performance Plan. Participation in the EI Association meeting includes all local EI provider directors, at least one ICC representative, the Parent Consultant Program Manager, the Training and Technical Assistance Coordinator and Specialist, and the Part C Coordinator. A review of the APR requirements and a discussion of the data were facilitated. Each provider also received an individualized letter dated January 5, 2009. An Indicator Progress Review Chart, which provides data for each indicator by provider, as well as this annual report and an updated State Performance Plan is available on the DHS website at <a href="http://www.dhs.state.ri.us/dhs/famchild/ei reports.htm">http://www.dhs.state.ri.us/dhs/famchild/ei reports.htm</a> for public review and has been shared electronically with the ICC and interested parties in January 2008.

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Monitoring Priority: Early Intervention Services In Natural Environments

**Indicator #1:** Percent of infants and toddlers with IFSPs who receive the Early Intervention services on their IFSPs in a timely manner.

(20 USC 1416(a)(3)(A) and 1442)

**Measurement:** Percent = # of infants and toddlers with IFSPs who receive the Early Intervention services on their IFSPs in a timely manner divided by the total # of infants and toddlers with IFSPs times 100.

Data Source: Focused Monitoring Data

FFY	Measurable and Rigorous Target
07-08	100%

Actual Data for 07-08: 83.33%

	# of	
Timely Services (July 1, 2007-June 30, 2008)	children	%
Number of child records reviewed and found compliant	110	76.39%
Number of children with untimely services due to family reason	10	6.94%
Number of child records reviewed and found non-compliant	24	16.67%
Total	144	100.00%

# Discussion of Improvement Activities Completed <u>and Explanation of Progress or Slippage that occurred for 07-08:</u>

RI has made progress with this indicator. In FFY 06-07, 82.0% of records reviewed were found compliant relative to the receipt of timely services compared with 83.3% for FFY 07-08. Additional FFY 07-08 quarterly analysis found 79.2% of records reviewed during January-March of 2008 (N = 96) showed timely receipt of services compared to 91.7% (N = 48) of records reviewed during April-June of 2008.

RI defines timely services as services initiated within 30 days of the signature on the initial and subsequent IFSPs active during the review period.

An IFSP was considered in compliance if all services were delivered within 30 days or if a service was not delivered due to exceptional family circumstances that were documented in the record (e.g., child illness, family illness, hospitalization, or family unable to be contacted.

Data for this indicator was collected through a self-assessment completed in October 2008 by each provider. The State gave each provider a list of specific records to review that made up 10% of the enrollment for that provider (or 20 records, which ever number was greater). The records selected

were for children who were referred and enrolled after January 1, 2008. This date was selected as it coincided with the rollout of an improvement activity of developing new paperwork and guidance. The State compared the self-assessment data with the data from RIEICCS, the state data collection system for Early Intervention. The State then conducted site visits for all providers whose data from the self-assessment was below 95%. The State then selected 5% of those records and conducted data verification at each program as well.

Timely Services is reviewed by taking all new services listed on the initial and subsequent IFSPs and comparing it to the Services Rendered Forms to determine if a service was provided within 30 days of the signature on the IFSP. The Paperwork Project (improvement activity) has resolved the disconnect between the services indicated on the IFSP and how they were coded on the services rendered forms. Services Rendered Forms are used by staff in the field to document that a service took place and for submitting claims to insurers. When there was a disconnect, it appeared as though a service did not occur when it was really coded incorrectly. After conducting site visits, we are confident that the new paperwork did resolve the issues, as significant improvement was evident in comparison of pre-improvement activity records vs post-improvement activity records.

Further analysis of the site visits and record reviews indicate that the primary cause for non-compliance during this time period was insufficient funding to support the recruitment/retention of certain therapists (OT, PT, and speech), despite the steady growth of enrollment. These are the services that are most often delivered un-timely. In all cases children did receive the services identified on their IFSP's, but they were considered untimely.

A secondary cause is the difficulty that providers have in monitoring their compliance. The State utilizes self-assessment data for reporting to ensure that valid and reliable data is available for this report, but the RIEICCS report that providers are able to utilize to track their compliance/progress in this area is unreliable. Tracking of all new services, which often occur mid-IFSP is not reliably captured with the data report. The State is planning to convene a meeting to discuss the possibility of changing its definition of timely service in order to simplify the system and to better track compliance/progress in this area.

A third factor contributing to noncompliance is that Rhode Island has an excellent system for child find (indicators 5 & 6) and has experienced steady and continual enrollment growth. The State has certified three new programs since 1/06, in an effort to improve the timeliness and quality of services to all children and families. Although some progress can be contributed to this improvement activity, it did spread the pool of available therapists in Rhode Island even thinner.

#### **Enrollment**

2004-05: **1290** 2007-08: **1646** 2005-06: **1610** 2008-09: **1690** 

Year Non-	Total	# of Findings	# of Findings for which	Total	%
compliance	Findings:	Corrected and	Correction was	Findings	Findings
Identified	Timely	Verified within	subsequently corrected	Corrected	Corrected
	Services	1 year	and verified		as of
					2/1/09
FFY 04-05	7	0	7	7	100%
FFY 05-06	0	0	0	0	100%
FFY 06-07	6	6	0	6	100%
FFY 07-08	6	N/A*	N/A	0	0

<sup>\*</sup> Findings from FFY 07-08 were made 1-6-09 and the one-year correction requirement has not yet passed.

All providers with findings are required to submit corrective action plans on State mandated reporting template that includes a section for providers to document their analysis of why the non-compliance occurred, steps to be taken to reach compliance, by whom and by when. These corrective action plans must be approved by the State. Providers are also required to submit evidence of correction within one year that includes evidence that the steps identified were taken and the result of those steps via a data report.

	Correction of Non-Compliance	Description
1.	Describe the analysis that the state did to determine <i>where</i> the noncompliance occurred (in which El programs);	<ul> <li>desk audit of all programs (utilizing state-wide El data system)</li> </ul>
		<ul> <li>program self-assessment of all IDEA requirements, with state defined set of children/records</li> </ul>
		<ul> <li>site-based focused monitoring with data verification (record review)</li> </ul>
		<ul> <li>formalization of Data Review Committee that convenes monthly meetings for review/analysis/technical assistance planning</li> </ul>
2.	Describe the state's process for determining why that noncompliance occurred, both at state level and local level;	<ul> <li>program self-assessment including explanation of cause for non-compliance</li> <li>site-based discussion of root causes with management staff</li> <li>comparison of data across programs/over time</li> <li>disaggregation of data by service/time period/provider</li> <li>program survey re: recruitment/retention patterns</li> </ul>
3.	Describe what the state did to require EI programs to revise policies, procedures or practices (if needed);	<ul> <li>developed and implemented required new paperwork</li> <li>state-wide, site-based training/technical assistance accompanied new El paperwork</li> <li>completion /dissemination of new IFSP Guidance Document</li> <li>regular data requests to all programs re: missing data corrective action plans required of all programs with a finding of non-compliance in this area</li> </ul>
4.	Explain how the state <i>collected data to verify</i> that the noncompliance was corrected	<ul> <li>corrective action plans required of all programs with a finding of non-compliance in this area.</li> <li>corrective action plans included: steps to be taken to correct the issue of non-compliance, by whom, and by when- State followed up by requiring evidence that the steps were taken and that the issue that caused the non-compliance was corrected.</li> </ul>
5.	Describe any <i>enforcement actions</i> that the state took for any El programs that did not correct noncompliance in a timely manner (within one year).	1 Program (Children's Friend and Service) had not

Improvement Activities	Timelines	Resources	Status
Training and technical assistance	Ongoing	Sherlock Center on Disabilities	Ongoing
New data system	8/06 implementation and ongoing	Data manager and Welligent	Ongoing
Analysis of data reports	Monthly and Ongoing	Data manager, providers, lead agency staff	Ongoing
Develop a reimbursement manual	June 08	Lead agency staff, providers, Sherlock Center on Disabilities	Completed and disseminated August 2008.
Revise El paperwork in order to ensure accurate match between IFSP service and service coded on services rendered forms. Reimbursement Guide will be completed, but is no longer the mechanism for improved compliance in this area; instead, this was done through the paperwork revisions.	Pilot by 12/07 Implement by 3/08	Paperwork Project Committee (Lead agency staff, Sherlock Center on Disabilities, providers)	Completed
Monitor reliability and accuracy of timely services data report.	6/08 and ongoing	Data manager, providers	Completed 6/08 and ongoing

Improvement Activities	Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 07-08 Improvement Activities	Timelines	Resources
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New activity: Analyze and decide whether or not to change timely service definition to date of initiation as agreed to by the parent signature on the IFSP in order to simplify and improve reliability of monitoring reports.	Make final decision by 3/31/09 and implement by 5/1/09	Data manager, providers, ICC, lead agency staff, Sherlock Center on Disabilities
New activity: In order to address the difficulties that providers face in recruitment and retention of therapists, the State will begin collaboration with higher education personnel to (1) develop consistent procedures for student placements/internships in EI (2) convene a high interest training annually for EI and other early childhood staff (3) develop and present on career choices in EI to a variety of college and community venues	By 12/08 and ongoing	Sherlock Center on Disabilities and the University of RI.

Monitoring Priority: Early Intervention Services In Natural Environments

**Indicator #2:** Percent of infants and toddlers with IFSPs who primarily receive Early Intervention services in the home or programs for typically developing children.

(20 USC 1416(a)(3)(A) and 1442)

**Measurement:** Percent = # of infants and toddlers with IFSPs who primarily receive Early Intervention services in the home or programs for typically developing children divided by the total # of infants and toddlers with IFSPs times 100.

Data Source: Data collected for reporting under section 618 (Annual Report of Children Served).

FFY	Measurable and Rigorous Target
07-08	95%

Actual for 07-08: 85.86%

Natural Environments for FFY 07-08	
	# of children
Children served in: HOME Children served in: COMMUNITY-BASED SETTING	1308 143
Children served in: OTHER SETTING (services provided in a setting that is not home or community based. These settings include, but are not limited to, services provided in a hospital, residential facility, clinic, and El center/setting for children with disabilities)	239
TOTAL # of children with IFSP's	1690
% of children in Natural Environment (Home + Community Based Setting)	85.86%
% of children in Natural Environment (Home + Community Based Setting) AND those served in OTHER SETTINGS with justification	100%

Discussion of Improvement Activities Completed <u>and Explanation of Progress or Slippage that occurred for 07-08:</u>

Slippage has occurred in this area from 88.94% in FFY 06-07 to 85.86% in FFY 07-08. Two factors have largely contributed to this change. First, data for this indicator are from the one-day count (December 1, 2007) required for the 618 data report due February 1, 2008. The percentage of infants and toddlers with IFSPs who primarily receive Early Intervention services in the home or programs for typically developing children for the FFY 07-08, based on the whole year and not a date in time is **90.46%**.

The Paperwork Project (improvement activity with implementation on 1/1/08), included clarification to providers about each of the categories (home, community, and other setting). Through the paperwork project, RI has made improvements in the documentation of justifications for providing services in a non-natural environment. RI assures that these plans are individualized and document the plan for shifting services to the child's natural environment if they are not initially planned that way. The lead agency expects that this will better ensure that teams are making individualized decisions regarding the settings in which infants and toddlers receive early intervention services and that clear, quality plans are in place to move that child's services into a natural setting.

NATURAL ENVIRONMENTS	FY 04-05	FY 05-06	FY 06-07	FY 07-08
Services provided in natural environments	94.81	91.41	88.94	85.86
Documented justified reason for non-natural environment	.60	4.03	7.05	14.14
Demonstration of improvement in this area	95.41	95.44	95.99	100%

A second major factor contributing to the slippage in this area for FFY 07-08 is increasing enrollment, particularly those children with diagnosis on the autism spectrum. IFSP teams (including families) have increasingly made decisions to work on outcomes in more intensive group settings.

It is expected that slippage may continue on this indicator as the state has also made policy changes with regards to services listed on the IFSP. Service coordination and wrap-around services (such as interpretation and transportation) are no longer listed within the services on the IFSP. These services are available as needed and are documented elsewhere on the IFSP, so they were not entered in the data system from the IFSP services page. Service coordination, interpretation, and transportation typically occur in the natural environment and eliminating them from the services page will negatively impact the measurement percentage of this indicator. The impact will be analyzed and reviewed on an ongoing basis.

3 findings were issued to programs for non-compliance in this area for insufficient justifications for providing services in non-natural settings. Although a justification was documented, it was not considered sufficient. These programs have been required to submit corrective action plans to address the issue.

Improvement Activities	Timelines	Resources	Status
Introduction to EI- training for all new staff	Twice annually	Sherlock Center on Disabilities, Rhode Island Parent Information Network, Lead agency staff	Ongoing
Review and analysis of statewide and program data	Monthly	Data manager, providers	Ongoing
Justification for services provided in the non-natural environment-added to system	8/06	Data manager, Welligent	Completed
Public awareness activities to increase the understanding of El services and delivery model.	Each provider must complete 3 activities annually	Providers	Ongoing
Paperwork revision project	Pilot by 12/07 Implement by 3/08	Paperwork Project committee (Lead agency staff, Sherlock Center on Disabilities, providers)	Completed and implemented 1/08  Training and TA-ongoing
Paperwork revision project to match federal location settings-clarification to be sent to all providers	By 3/08	Data manager, providers	Completed 1/08

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for  $FFY\ 07-08$ 

#### Monitoring Priority: Early Intervention Services In Natural Environments

Indicator #3: Percent of infants and toddlers with IFSPs who demonstrate improved:

- 1. Positive social-emotional skills (including social relationships);
- 2. Acquisition and use of knowledge and skills (including early language/communication); and
- 3. Use of appropriate behaviors to meet their needs. (20 USC 1416(a)(3)(A) and 1442)

#### Measurement:

#### 1. Positive social-emotional skills (including social relationships):

- a. Percent of infants and toddlers who reach or maintain functioning at a level comparable to same-aged peers = # of infants and toddlers who reach or maintain functioning at a level comparable to same-aged peers divided by # of infants and toddlers with IFSPs assessed times 100.
- b. Percent of infants and toddlers who improve functioning = # of infants and toddlers who improved functioning divided by # of infants and toddlers with IFSPs assessed times 100.
- c. Percent of infants and toddlers who did not improve functioning = # of infants and toddlers who did not improve functioning divided by # of infants and toddlers with IFSPs assessed times 100.

If children meet the criteria for a, report them in a. Do not include children reported in a in b or c. If a + b + c does not sum to 100%, explain the difference.

#### 2. Acquisition and use of knowledge and skills (including early language/communication):

- a. Percent of infants and toddlers who reach or maintain functioning at a level comparable to same-aged peers = # of infants and toddlers who reach or maintain functioning at a level comparable to same-aged peers divided by # of infants and toddlers with IFSPs assessed times 100.
- b. Percent of infants and toddlers who improved functioning = # of infants and toddlers who improved functioning divided by # of infants and toddlers with IFSPs assessed times 100.
- c. Percent of infants and toddlers who did not improve functioning = # of infants and toddlers who did not improve functioning divided by # of infants and toddlers with IFSPs assessed times 100.

If children meet the criteria for a, report them in a. Do not include children reported in a in b or c. If a + b + c does not sum to 100%, explain the difference.

#### 3. Use of appropriate behaviors to meet their needs:

- a. Percent of infants and toddlers who reach or maintain functioning at a level comparable to same-aged peers = # of infants and toddlers who reach or maintain functioning at a level comparable to same-aged peers divided by # of infants and toddlers with IFSPs assessed times 100.
- b. Percent of infants and toddlers who improved functioning = # of infants and toddlers who improved functioning divided by # of infants and toddlers with IFSPs assessed

times 100.

c. Percent of infants and toddlers who did not improve functioning = # of infants and toddlers who did not improve functioning divided by # of infants and toddlers with IFSPs assessed times 100.

If children meet the criteria for a, report them in a. Do not include children reported in a in b or c. If a + b + c does not sum to 100%, explain the difference.

**Data Source**: Data collected through the Rhode Island Early Intervention Care Coordination System (RIEICCS)

FFY	Measurable and Rigorous Target
07-08	N/A

#### Actual Data for 07-08:

See State Performance Plan for current data and improvement activities.

Discussion of Improvement Activities Completed <u>and Explanation of Progress or Slippage that occurred for 07-08:</u>

N/A

Revisions, <u>with Justification</u>, to Proposed Targets / Improvement Activities / Timelines / Resources for 07-08.

N/A

**Monitoring Priority: Early Intervention Services In Natural Environments** 

**Indicator #4:** Percent of families participating in Part C who report that Early Intervention services have helped the family:

- A. Know their rights;
- B. Effectively communicate their children's needs; and
- C. Help their children develop and learn.

(20 USC 1416(a)(3)(B) and 1442)

#### Measurement:

- A. Percent = # of respondent families participating in Part C who report that Early Intervention services have helped the family know their rights divided by the # of respondent families participating in Part C times 100.
- B. Percent = # of respondent families participating in Part C who report that Early Intervention services have helped the family effectively communicate their children's needs divided by the # of respondent families participating in Part C times 100.
- C. Percent = # of respondent families participating in Part C who report that Early Intervention services have helped the family help their children develop and learn divided by the # of respondent families participating in Part C times 100.

Data Source: Family Survey 2006-2007

FFY	Measurable and Rigorous Target
07-08	A. 86% B. 92% C. 93%

#### **Actual Target Data for FFY 07-08**

- A) 89.04%
- B) 93.53%
- C) 93.75%

A) Q#16 - To what extent has early intervention helped your family know and understand your rights?

Agency	# SCORED 5 OR ABOVE	Total	%
Children's Friend and Service	31	32	96.88%
Easter Seals	22	23	95.65%
Family Resources	42	46	91.30%
Family Service	43	49	87.76%
Hasbro	47	54	87.04%
Homestead	31	36	86.11%
Looking Upwards	10	10	100.00%
Maher Center	31	33	93.94%

Meeting Street Center	95	108	87.96%
Trudeau Memorial	103	120	85.83%
State Total	455	511	89.04%

# **B)** Q#17 - To what extent has early intervention helped your family effectively communicate your child's needs?

Agency	# SCORED 5 OR ABOVE	Total	%
Children's Friend and Service	31	32	
Easter Seals	22	23	
Family Resources	42	46	
Family Service	44	49	89.80%
Hasbro	52	54	96.30%
Homestead	32	37	86.49%
Looking Upwards	10	10	100.00%
Maher Center	32	33	96.97%
Meeting Street Center	100	107	93.46%
Trudeau Memorial	112	119	94.12%
State Total	477	510	93.53%

C) To what extent has early intervention helped your family be able to help your child develop and learn?

Agency	# SCORED 5		
	OR ABOVE	Total	%
Children's Friend and Service	32	32	100.00%
Easter Seals	21	23	91.30%
Family Resources	41	46	89.13%
Family Service	45	50	90.00%
Hasbro	51	54	94.44%
Homestead	32	37	86.49%
Looking Upwards	10	10	100.00%
Maher Center	32	33	96.97%
Meeting Street Center	100	107	93.46%
Trudeau Memorial	116	120	96.67%
State Total	480	512	93.75%

#### NOTES:

<sup>\*</sup>Looking Upwards became a certified provider as of 3/27/07.

<sup>\*\*</sup>Please see attached family survey.

# Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for *FFY 07-08*:

RI has continued to make progress in each of the family outcomes, as well as consistently increased the response rate of the surveys.

Under a contract with the Rhode Island Department Human Services (DHS), the Rhode Island Parent Information Network (RIPIN) provides parent consultant services to all certified Early Intervention programs in RI. Within this contract, RIPIN administers the annual Family Survey, and has done so under a previous contract with the RI Department of Health, since 2000.

The <u>Early Childhood Outcomes Center</u> (ECO Center) Family Outcomes Survey was utilized beginning with the 2006 Family Survey. With permission from the ECO Center, changes were made to the format, as well as minor changes to some questions to reflect current practice and language in RI. For the 2008 Family Outcomes Survey, the same cover letter and survey from 2007 were utilized.

The Family Survey is color-coded to identify the EI Provider and is mailed in envelopes that have a return address of RIPIN and utilizes both the EI and RIPIN logo. Also included is a cover letter explaining the survey; the optional demographics page, and a self-addressed stamped envelope to be returned to the Parent Consultant Program at RIPIN.

Aggregated information from the return surveys includes: number of returns, number of undeliverable addresses, DCYF involvement, El Provider, Language (English or Spanish), and profiles and scoring of the individual questions. Demographic information collected includes: who is completing the survey, child's age when referred, child's age now, length of time in El, 1<sup>st</sup>- 2<sup>nd</sup>- 3<sup>rd</sup> child in El and # of children in El currently, race/ethnicity, primary diagnosis, parental education and household income.

Families are asked if they would like to share their survey with their Service Coordinator and/or have a Parent Consultant/RIPIN staff person contact them. If a family answers yes to sharing, a complete copy of the survey is given to the Service Coordinator for the family file; which helps the SC to assist the family in reaching goals related to RI's EI Family Outcomes. If a family chooses not to share or be contacted, their information and data remains anonymous.

Finalized reports, excluding any family identifiable information, are given to the EI Providers, the ICC and to DHS. This information is also available to families and the public at their request.

RI included the 5 Family Outcomes of the ECO Center on the new IFSP itself. This reference is at a point in the IFSP prioritizing process where families are reminded of 'what we want for all families'. Via training, service coordinators are encouraged to refer families to those family outcomes as a potential trigger to identifying a need that could be developed into an IFSP outcome.

Although RI's reporting focuses on the 3 family outcomes (above), RI collects data and analyzes it for all the survey questions as a means to develop improvement activities for training, public awareness, and service delivery for families.

In addition, the family outcomes are now included on all training and public awareness materials.

Survey Response Rates	FFY 05-06	FFY 06-07	FFY 07-08
English Delivered	1423	1316	1501
English Returned	411	455	500
English Return Rate	28.88%	34.57%	33.31%

Spanish Delivered	130	109	114
Spanish Returned	16	33	26
Spanish Return Rate	12.31%	30.28%	22.81%
Total Delivered	1533	1425	1615
Total Returned	427	488	526
Total Return Rate	27.50%	34.24%	32.57%

Improvement Activities	Timelines	Resources	Status
Include age of child when referred to demographic question in order to improve ability to analyze data.	In 2007 family survey	RIPIN, lead agency staff, families, providers	Completed
DHS will meet with each program to review survey return rates & outcome data. DHS will open discussion regarding what went well, contributing factors to survey return rates and brainstorm ways to improve return rates.	Annually	Lead agency staff, RIPIN, providers, ICC	Ongoing
DHS will share outcome data with all certified EI programs and provide TA regarding use of data to improve outcomes, such as incorporating survey questions into regular conversations with families.	Annually	Lead agency staff, RIPIN, providers, ICC	Ongoing
DHS will revise paperwork/IFSP to incorporate family outcomes into routine conversations and interventions with family.	August 2007	Lead agency staff, RIPIN, providers, ICC	Completed

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 07-08: NA

Monitoring Priority: Effective General Supervision Part C / Child Find

Indicator #5: Percent of infants and toddlers birth to 1 with IFSPs compared to:

- A. Other States with similar eligibility definitions; and
- B. National data.

(20 USC 1416(a)(3)(B) and 1442)

#### Measurement:

- A. Percent = # of infants and toddlers birth to 1 with IFSPs divided by the population of infants and toddlers birth to 1 times 100 compared to the same percent calculated for other States with similar (narrow, moderate or broad) eligibility definitions.
- B. Percent = # of infants and toddlers birth to 1 with IFSPs divided by the population of infants and toddlers birth to 1 times 100 compared to National data.

**Data Source:** Data collected for reporting under section 618 (Annual Report of Children Served). <a href="http://www.ideainfanttoddler.org/2007">http://www.ideainfanttoddler.org/2007</a> Child Count Data Charts.pdf

FFY	Measurable and Rigorous Target
07-08	1.75%

Actual Data for 07-08: 2.29% for both A and B (See website above for data on all States):

- A) In 2007, Rhode Island ranks 1st (2.29%) out of the Moderate Eligibility Criteria states for serving eligible infants with disabilities under the age of one.
- B) In 2007, Rhode Island ranks 5<sup>th</sup> (2.29%) out of the fifty states and District of Columbia for serving eligible infants under age 1 with disabilities.

# Discussion of Improvement Activities Completed <u>and Explanation of Progress or Slippage that occurred for FFY 07-08:</u>

RI has reached its target and continues to make progress in this area. RI has a very well coordinated system for identifying and referring newborns and very young children to Early Intervention across the state. All child find efforts remain in effect. They are coordinated with other child find resources in the state such as Maternal and Child Health through the Family Outreach Program, Universal Newborn Screening, and the Vulnerable Infants Program; Medicaid through RIteCare and CEDARR Family Centers; the Department of Children, Youth and Families through the CAPTA initiative and Head Start/Early Head Start.

RI EI providers receive referrals from all across the state and do not currently have catchment areas that they serve. All certified providers are required to conduct at least three public awareness activities per calendar year, which they report to the lead agency. These include a wide range of activities, such as outreach to potential new referral sources, meet and greet gatherings with pediatricians, EI materials to local libraries, participation in health fairs, and trainings on developmental milestones to groups such as the Narragansett Indian Tribe.

# Rhode Island Department of Human Services Early Intervention Primary Service Location by City and Town December 1, 2008

<u>City/Town</u>	# of Children Under Age 1	<u>% of</u> <u>Children</u> Under Age 1	December 1 Enrollment	% of Children per City Under Age 1
Barrington	182	1%	1	1%
Bristol	208	2%	8	4%
Burrillville	155	1%	2	1%
*Central Falls	287	2%	6	2%
Charlestown	99	1%	0	0%
Coventry	395	3%	5	1%
Cranston	798	7%	17	2%
Cumberland	335	3%	4	1%
East Greenwich	90	1%	3	3%
East Providence	485	4%	7	1%
Exeter	58	0%	0	0%
Foster	40	0%	0	0%
Glocester	105	1%	0	0%
Hopkinton	93	1%	5	5%
Jamestown	37	0%	1	3%
Johnston	289	2%	7	2%
Lincoln	199	2%	5	3%
Little Compton	36	0%	0	0%
Middletown	209	2%	7	3%
Narragansett	137	1%	3	2%
New Shoreham	10	0%	1	10%
*Newport	294	2%	4	1%
North Kingstown	304	2%	9	3%
North Providence	292	2%	2	1%
North Smithfield	108	1%	2	2%
*Pawtucket	1,004	8%	26	3%
Portsmouth	161	1%	3	2%
*Providence	2,590	21%	65	3%
Richmond	111	1%	0	0%
Scituate	108	1%	1	1%
Smithfield	163	1%	0	0%

South Kingstown	290	2%	9	3%
Tiverton	141	1%	1	1%
Warren	124	1%	0	0%
Warwick	874	7%	16	2%
West Greenwich	61	0%	0	0%
*West Warwick	397	3%	8	2%
Westerly	269	2%	6	2%
*Woonsocket	668	5%	20	3%
Unknown	NA	NA	0	NA
Core Cities	5,240	14%	129	1%
Remainder of State	6,966	18%	125	1%
Rhode Island	12,206	32%	254	1%

<sup>\*</sup>Population under age 3 is based on Census 2000 and may not reflect increases or decreases in population.

Population under 1 Data Set: Census 2000 Summary File 1 (SF 1) 100-Percent Data

P14. SEX BY AGE FOR THE POPULATION UNDER 20 YEARS [43] - Universe: Population under 20 years

Based On RI Kidscount Data, Enrollment based on preliminary December 1 count data

Improvement Activities	Timelines	Resources	Status
CAPTA referrals system development and implementation	March 06	DCYF, Lead agency staff, ICC	Completed
Require feedback loop to referral source-improve data system to monitor and provide trigger to complete within the paperwork.	August 07	Data Manager, providers	Completed
All certified providers required to complete 3 public awareness activities	Annually	Providers	Ongoing
Outreach to physician/pediatric community and develop curriculum for presentation to this target group.	December 2006: Presentation curriculum developed  June 2007: Posters to pediatricians	Sherlock Center on Disabilities, Lead agency staff, ICC, RIPIN	Completed
Outreach posters for all EI providers	February 2007	Sherlock Center on Disabilities, providers, Lead agency staff	Completed
Additional newborn screenings to be put into place (12 screenings to 29	July 2006	Dept of Health, Lead agency	Completed

# Part C - SPP/APR

Rhode Island State

# Part C State Annual Performance Report (APR) for FFY 2007-2008

screenings)		

Revisions, <u>with Justification</u>, to Proposed Targets / Improvement Activities / Timelines / Resources for  $FFY\ 07-08$ :

Monitoring Priority: Effective General Supervision Part C / Child Find

Indicator #6: Percent of infants and toddlers birth to 3 with IFSPs compared to:

A. Other States with similar eligibility definitions; and

B. National data.

(20 USC 1416(a)(3)(B) and 1442)

#### Measurement:

- A. Percent = # of infants and toddlers birth to 3 with IFSPs divided by the population of infants and toddlers birth to 3 times 100 compared to the same percent calculated for other States with similar (narrow, moderate or broad) eligibility definitions.
- B. Percent = # of infants and toddlers birth to 3 with IFSPs divided by the population of and toddlers birth to 3 times 100 compared to National data.

**Data Source:** Data collected for reporting under section 618 (Annual Report of Children Served). http://www.ideainfanttoddler.org/2007 Child Count Data Charts.pdf

FFY	Measurable and Rigorous Target
07-08	3.60%

Actual Target Data for 07-08 (See website above for data on all States): 4.61% for both A and B

- A. In 2007, Rhode Island ranks 1st (4.61%)out of the Moderate Eligibility Criteria states for serving eligible infants with disabilities.
- B. In 2007, Rhode Island ranks 4<sup>th</sup> (4.61%)out of the fifty states and District of Columbia for serving eligible infants with disabilities.

# Discussion of Improvement Activities Completed <u>and Explanation of Progress or Slippage that occurred for FFY 07-08:</u>

RI continues to make progress in this area. RI has a very well coordinated system for identifying and referring newborns and very young children to Early Intervention across the state. All child find efforts remain in effect. They are coordinated with other child find resources in the state such as Maternal and Child Health through the Family Outreach Program, Universal Newborn Screening, and the Vulnerable Infants Program; Medicaid through RIteCare and CEDARR Family Centers; the Department of Children, Youth and Families through the CAPTA initiative and Head Start/Early Head Start.

RI El providers receive referrals from all across the state and do not currently have catchments areas that they serve. All certified providers are required to conduct at least three public awareness activities per calendar year, which they report to the lead agency. These include a wide range of activities, such as outreach to potential new referral sources, meet and greet gatherings with pediatricians, El materials to local libraries, participation in health fairs, and trainings on developmental milestones to groups such as the Narragansett Indian Tribe.

## **Rhode Island Department of Human Services**

Early Intervention Primary Service Location by City and Town December 1, 2008

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City/Town	# of Children Under Age 3*	% of Children Under Age 3	December 1 Enrollment	% of Children per City Under Age 3
Barrington	570	2%	22	4%
Bristol	655	2%	41	6%
Burrillville	509	1%	24	5%
Central Falls	990	3%	30	3%
Charlestown	289	1%	12	4%
Coventry	1,243	3%	78	6%
Cranston	2,455	6%	125	5%
Cumberland	1,136	3%	58	5%
East Greenwich	384	1%	13	3%
East Providence	1,552	4%	67	4%
Exeter	187	0%	7	4%
Foster	113	0%	9	8%
Glocester	335	1%	9	3%
Hopkinton	282	1%	20	7%
Jamestown	132	0%	4	3%
Johnston	893	2%	32	4%
Lincoln	662	2%	30	5%
Little Compton	107	0%	5	5%
Middletown	700	2%	24	3%
Narragansett	403	1%	20	5%
New Shoreham	35	0%	2	6%
Newport	941	2%	38	4%
North Kingstown	1,034	3%	63	6%
North Providence	885	2%	16	2%
North Smithfield	337	1%	22	7%
Pawtucket	2,957	8%	144	5%
Portsmouth	583	2%	26	4%
Providence	7,642	20%	378	5%
Richmond	321	1%	4	
Scituate	371	1%	9	2%
Smithfield	499	1%	14	3%
South Kingstown	868	2%	48	6%
Tiverton	461	1%	15	3%
Warren	355	1%	11	3%
Warwick	2,714	7%	136	5%
West Greenwich	192	1%	11	6%
West Warwick	1,136	3%	74	7%
Westerly	827	2%	34	4%
Woonsocket	2,020	5%	142	7%
Unknown	NA	NA	6	NA

Core Cities	15,686	42%	806	5%
Remainder of State	22,089	58%	1,011	5%
Rhode Island	37,775	100%	1,817	5%

<sup>\*</sup>Population under age 3 is based on Census 2000 and may not reflect increases or decreases in population.

Population under 1 Data Set: Census 2000 Summary File 1 (SF 1) 100-Percent Data

P14. SEX BY AGE FOR THE POPULATION UNDER 20 YEARS [43] - Universe: Population under 20 years

Based On RI KidsCount Data, Enrollment based on preliminary December 1 count data

Improvement Activities	Timelines	Resources	Status
CAPTA referrals system development and implementation	March 06	DCYF, Lead agency staff, ICC	Completed
Require feedback loop to referral source- improve data system to monitor and provide trigger to complete within the paperwork	August 07	Data Manager, providers	Completed
All certified providers required to complete 3 public awareness activities	Annually	Providers	Ongoing
Outreach to physician/pediatric community and develop curriculum for presentation to this target group.	December 2006: Presentation curriculum developed June 2007: Posters to pediatricians	Sherlock Center on Disabilities, Lead agency staff, ICC, RIPIN	Completed
Outreach posters for all El providers	February 2007	Sherlock Center on Disabilities, providers, Lead agency staff	Completed
Additional newborn screenings to be put into place (12 screenings to 29 screenings)	July 2006	Dept of Health, Lead agency	Completed

Revisions, <u>with Justification</u>, to Proposed Targets / Improvement Activities / Timelines / Resources for *FFY 07-08*:

Monitoring Priority: Effective General Supervision Part C / Child Find

**Indicator #7:** Percent of eligible infants and toddlers with IFSPs for whom an evaluation and assessment and an initial IFSP meeting were conducted within Part C's 45-day timeline.

(20 USC 1416(a)(3)(B) and 1442)

#### Measurement:

Percent = # of eligible infants and toddlers with IFSPs for whom an evaluation and assessment and an initial IFSP meeting was conducted within Part C's 45-day timeline divided by # of eligible infants and toddlers evaluated and assessed times 100. Account for untimely evaluations.

**Data Source:** Data to be taken from monitoring or State data system and must address timeline from point of referral to initial IFSP meeting based on actual, not an average, number of days.

FFY	Measurable and Rigorous Target
07-08	100%

#### Actual Data for 07-08: 83.33%

Data for this indicator includes children with a completed assessment/evaluation and initial IFSP meeting held during the time period of January 1, 2008 – June 30, 2008 from self-assessment data.

IFSPs held within 45 day time period	92
IFSPs with documented family reason for delay	33
IFSPs held beyond 45 day time period (no documented family reason)	25
TOTAL	150
% IFSPs held within 45 day time period (92 / 150) % IFSPs held within 45 day time period + documented family reason for delay	61.33%
(92+ 33 / 150)	83.33%

# Discussion of Improvement Activities Completed <u>and Explanation of Progress or Slippage that occurred for 07-08:</u>

RI made progress in this area. In FFY 05-06, 71.70% of records reviewed were found compliant and in FFY 06-07, 79.73% of records reviewed were found compliant relative to timely evaluation and IFSP meetings compared with 83.3% for FFY 07-08. Additional FFY 07-08 quarterly analysis found 80% of records reviewed during January-March of 2008 (N = 100) showed compliance to timelines compared to 90% (N = 50) of records reviewed during April-June of 2008.

<u>Reason</u>	<u>45</u> days	<u>50</u> days	<u>60</u> days	<u>70</u> days	<u>80</u> days	<u>Over 80</u> (81)days
Compliance	92					
1) Child illness/hospitalization	1					
Family requested delay	18					
3) Unable to contact/family cancellation	14					
4) Provider Issue	0	6	9	7	2	1
Blank-no reason noted	0	0	0	0	0	0
Total	125	6	9	7	2	1
Total within time frame	125	131	140	147	149	150
Percentage within time frame	83.33%	87.33%	93.33%	98.00%	99.33%	100%

The State has made improvement in this indicator and in all cases children received an evaluation/assessment and initial IFSP meeting within 81 days. The State has also demonstrated improvement as evidenced by a decrease in the number of days to compliance. 15 children had their initial IFSP's between 45-60 days after referral, while 10 children had their initial IFSP's between 70-81 days after referral.

Data for this indicator was collected through a self-assessment completed in October 2008 by each provider. The State gave each provider a list of specific records to review that made up 10% of the enrollment for that provider (or 20 records, which ever number was greater). The records selected were for children who were referred and enrolled after January 1, 2008. This date was selected as it coincided with the rollout of an improvement activity of developing new paperwork and guidance. (This is when the state improvement activity of developing new paperwork and guidance were rolled out.) The state compared the self-assessment data with the data from RIEICCS, the state data collection system for Early Intervention. The state then conducted site visits for all providers whose data from the self-assessment was below 95%. The State then selected 5% of those records and conducted data verification at each program as well.

Analysis of the site visits and record reviews indicate that the primary cause for non-compliance in this area was insufficient funding to support the ability of providers to address fluctuating increases in caseloads and staffing. More specifically, a high volume of medical and maternity leaves caused temporary reductions in staffing. The State has provided training/technical assistance focused on this indicator. A secondary cause was that some providers had been delaying the initial IFSP meeting until a later date following the eligibility determination, when a full array of services could be decided upon, rather than conducting an initial IFSP meeting to begin service planning and then holding subsequent meetings, as necessary, to finalize or fully develop the services plan. Subsequent to clarification provided to the State during the OSEP verification visit (9/08), the State has clarified to all programs that this 45-day time period is intended to determine eligibility and to begin service planning by conducting an initial IFSP meeting. It is with this view that the State has assisted programs to review and modify their evaluation, assessment, and initial IFSP meeting practices.

A third factor contributing to non-compliance is that Rhode Island has an excellent system for child find (indicators 5 & 6) and enrollment growth is steady. The State has certified three new programs since 1/06, in an effort to improve compliance to the 45-day timeline for all children and families.

#### **Enrollment**

2004-05: 1290 2005-06: 1610 2006-07: 1646 2007-08: 1690

Year Non- compliance Identified	Total Findings: 45 Day Timeline	# of Findings Corrected and Verified within 1 year	# of Findings for which Correction was subsequently corrected and verified	Total Findings Corrected	% Findings Corrected as of 2/1/09
FFY 04-05	7	6	1	7	100%
FFY 05-06	6	3	3	6	100%
FFY 06-07	4	4	0	4	100%
FFY 07-08	6	N/A*	N/A	0	0

<sup>\*</sup> Findings from FFY 07-08 were made 1-6-09 and the one-year correction requirement has not yet passed.

All providers with findings were required to submit corrective action plans on a State mandated reporting template that included a section for providers to document their understanding of why the non-compliance occurred, steps to be taken to reach compliance, by whom and by when. These corrective action plans must be approved by the State. Providers are also required to submit evidence of correction within one year that includes evidence that the steps identified were taken and the result of those steps via a data report.

One provider had uncorrected non-compliance since FFY 04-05 and has been monitored via monthly site visits focused on this indicator (see indicator 9 for more details). This program has recently corrected non-compliance in this area. The program submitted evidence of correction that included documentation that the steps identified in the corrective action plan were taken and the result of those steps via data reports.

1.	Correction of Non-Compliance  Describe the analysis that the state did to determine where the noncompliance occurred (in which EI programs);	Description     desk audit of all providers utilizing state-wide El data system     program self-assessment of all IDEA requirements with state-defined set of children/records     site-based focused monitoring of all programs with data verification (record review)     formalization of Data Review Committee monthly meetings for review/analysis/technical assistance planning
2.	Describe the state's process for determining why that noncompliance occurred, both at state level and local level;	<ul> <li>program self-assessment, including an explanation program-identified cause of non-compliance</li> <li>site-based discussion of root causes with management staff</li> <li>comparison of data across programs/over time periods</li> <li>disaggregation of data by service/time period/provider</li> </ul>

3. Describe what the state did to require El programs to revise policies, procedures or practices (if needed);  Correction of Non-Compliance  3. Describe what the state did to require El programs to revise policies, procedures or practices (if needed);	Description     program surveys re: staff recruitment/retention      state-wide, site-based training/technical assistance accompanied new El paperwork     completion/dissemination of new IFSP Guidance Document     data requests to all programs re: missing data
Explain how the state collected data to verify that the noncompliance was corrected	<ul> <li>corrective action plans required of all programs with a finding of non-compliance in this area.</li> <li>corrective action plans included: steps to be taken to correct the issue of non-compliance, by whom, and by when- State followed up by requiring evidence that the steps were taken and that the issue that caused the non-compliance was corrected.</li> </ul>
<ol> <li>Describe any enforcement actions that the state took for any EI programs that did not correct noncompliance in a timely manner (within one year).</li> </ol>	<ul> <li>mandated monthly data reporting</li> <li>mandated on-site data review meetings with management team</li> <li>mandated technical assistance with appropriate staff</li> <li>mandated clarification/change to program policy/practice</li> </ul>
Program-specific follow-up activities related to uncorrected non-compliance	<ul> <li>1 program (Trudeau) had uncorrected non-compliance in this area. This program was required to:</li> <li>clarify/change program policies/practices;</li> <li>provide monthly timeline data reports to the state</li> <li>meet with the state monthly to explain improvement activities and impact</li> <li>create an evening evaluation slot</li> <li>reassign staff to increase evaluation slots</li> </ul> Provider was also required to submit evidence of correction within one year that included evidence that the steps identified were taken and the result of those steps via a data report. The uncorrected noncompliance was verified as corrected and the finding was closed on 1-5-09.

Improvement Activities	Timelines	Resources	Status
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Technical assistance to all providers regarding data entry of reason if timeline not met.	4/06	Sherlock Center on Disabilities, Lead agency staff	Completed
Technical assistance and training on purpose of initial 45 days for eligibility determination and to get the plan started.	Ongoing	Sherlock Center on Disabilities, Lead agency staff	Ongoing
Certification of providers	Jan 06 for all previous providers and for Easter Seals.  June 06 for Homestead  March 07 for Looking Upwards	Certification Review Team (includes lead agency staff, Sherlock Center on Disabilities, ICC representative)	Completed
Routine data analysis- (programs were provided with data reports and are now able to run their own reports for quality monitoring purposes)	Ongoing	Data Manger, Welligent, Lead agency staff, Sherlock Center on Disabilities, providers	Ongoing

Revisions, <u>with Justification</u>, to Proposed Targets / Improvement Activities / Timelines / Resources for *FFY 07-08* 

N/A

Monitoring Priority: Effective General Supervision Part C / Effective Transition

**Indicator #8:** Percent of all children exiting Part C who received timely transition planning to support the child's transition to preschool and other appropriate community services by their third birthday including:

- A. IFSPs with transition steps and services
- B. Notification to LEA, if child potentially eligible for Part B: and
- C. Transition conference, if child potentially eligible for Part B.

(20 USC 1416(a)(3)(B) and 1442)

#### Measurement:

- A. Percent = # of children exiting Part C who have an IFSP with transition steps and services divided by # of children exiting Part C times 100.
- B. Percent = # of children exiting Part C and potentially eligible for Part B where notification to the LEA occurred divided by the # of children exiting Part C who were potentially eligible for Part B times 100.
- C. Percent = # of children exiting Part C and potentially eligible for Part B where the transition conference occurred divided by the # of children exiting Part C who were potentially eligible for Part B times 100.

**Data Source:** Focused Monitoring Data

FFY	Measurable and Rigorous Target
07-08	100%

#### **Actual Data for FFY 07-08:**

- A. 94% of children exiting Part C had an IFSP with transition steps and services.
- B. 100% of children exiting Part C and potentially eligible for Part B had a notification to the LEA.
- **C.** 91% of children exiting Part C and potentially eligible for Part B had a transition conference.

Category	# Records Compliant		% of Compliance
A-Transition Steps	136	144	94.44%
B-LEA Notification	154	154	100%
C-Transition Conference	116	127	91.34%

RI does not have a Part B notification opt-out policy. 144 records (out of 154 children with potential eligibility for Part B) indicated that families agreed to transition planning. 17 records indicated that a transition conference was not held timely due to exceptional family circumstances.

# Discussion of Improvement Activities Completed <u>and</u> Explanation of Progress or Slippage that occurred for FFY 07-08

Slippage occurred in the areas of transition steps (8A) and conferences (8C). Programs have maintained compliance at 100% for notification to the LEA (8B).

Data for these indicators was collected through a self-assessment completed in October 2008 by each provider. The State gave each provider a list of specific records to review that made up 10% of the enrollment for that provider (or 20 records, which ever number was greater). The records selected were for children who were referred and enrolled between July 1, 2007 and June 30, 2008 and who were discharged during this time at 34 months or older. The records chosen were the same for all indicators, which essentially limited the records reviewed for transition to children who were referred, enrolled, and discharged all during this period of time. Previously we used a different set of records for monitoring and reporting transition indicators, but in an attempt to simply the process this year the records selected were the same for all indicators. We understand that this is not a representative group of children and is only a review of children that were referred, enrolled and discharged within this one year time period (7/1/07-6/30/08). The State believes this contributed to evidence of slippage, but regardless is still considered non-compliance. A separate self-assessment will be used for monitoring and reporting on this indicator for next year.

The State compared the self-assessment data with the data from RIEICCS, the state data collection system for Early Intervention and made findings for any program that did not demonstrate compliance as noted below. The State then conducted site visits for all providers whose data from the self-assessment was below 95%. The State then selected 5% of those records and conducted data verification at each program as well. In addition to requiring corrective action plans for programs that were identified as having noncompliance and requiring submission of updated data to demonstrate correction, programs were also required to correct individual instances of noncompliance when possible.

Analysis of the site visits and record reviews indicate that 8 children did not have sufficient transition plans in place. 11 children did not have a timely transition conference. These children were referred, enrolled, and discharged at 34 months or older. The LEA was notified of all referrals. A new transition plan was put into place as part of the Paperwork Project in 2/08. Not all service coordinators were filling out the form correctly. Data analysis and program discussion indicated staff misunderstanding of the requirement for transition steps for all children exiting from Part C (not just those potentially eligible for Part B). Late referrals (34.5 months old) to Part C also impacted program non-compliance in this area. Part C State staff work collaboratively with Part B to more efficiently refer these children that are over 34.5 months to Part B.

Technical assistance to providers will continue. Transition Mentors from each program (including a staff person and the program parent consultant) will meet bi-monthly to discuss timelines, requirements and best practices in the transition process. Their responsibility is to disseminate this information to all program staff. This information includes examples of the documentation of transition activities (i.e., notification, steps, and conference).

Year Non-	Total	# of Findings	# of Findings for which	Total	%Findings
compliance	Findings for	Corrected and	Correction was	Findings	Corrected
Identified	(8A)	Verified within	subsequently corrected	Corrected	as of
	Transition	1 year	and verified		2/1/09
	Steps				
FFY 06-07	1	1	0	1	100%

FFY 07-08	5	N/A*	N/A	0	0
Year Non-	Total	# of Findings	# of Findings for which	Total	%Findings
compliance	Findings for	Corrected and	Correction was	Findings	Corrected
Identified	(8B) LEA	Verified within	subsequently corrected	Corrected	as of
	Notification	1 year	and verified		2/1/09
FFY 06-07	0	0	0	0	100%
FFY 07-08	0	0	0	0	100%

Year Non- compliance Identified	Total Findings for (8C) Transition Conference	# of Findings Corrected and Verified within 1 year	# of Findings for which Correction was subsequently corrected and verified	Total Findings Corrected	%Findings Corrected as of 2/1/09
FFY 06-07	1	1	0	1	100%
FFY 07-08	4	N/A*	N/A	0	0

<sup>\*</sup> Findings from FFY 07-08 were made 1-6-09 and the one-year correction requirement has not yet passed.

Correction of Non-Compliance  1. Describe the analysis that the state did to determine where the noncompliance occurred (in which EI programs);	Description     desk audit     program self-assessment     site-based focused monitoring including data verification (from program self-assessment)     Data Monitoring monthly meetings
Describe the state's process for determining why that noncompliance occurred, both at state level and local level;	<ul> <li>program self-assessment included program's explanation of reason/cause for non-compliance</li> <li>site-based discussion with program management staff</li> <li>comparison of data across programs/time periods</li> </ul>
Describe what the state did to require EI programs to revise policies, procedures or practices (if needed);	<ul> <li>state-wide, site-based training/technical assistance accompanied the new paperwork, including the new Transition Plan</li> <li>completion/dissemination of new IFSP Guidance Document</li> <li>new data entry guidelines for 'transition steps'</li> <li>data requests to all programs re: missing data</li> </ul>
Explain how the state collected data to verify that the noncompliance was corrected	<ul> <li>corrective action plans required of all programs with a finding of non-compliance in this area.</li> <li>corrective action plans included: steps to be taken to correct the issue of non-compliance, by whom, and by when- State followed up by requiring evidence that the steps were taken and that the issue that caused the non-compliance was corrected.</li> </ul>

5.	Describe any <i>enforcement actions</i> that the	N/A
	state took for any EI programs that did not	
	correct noncompliance in a timely manner	
	(within one year).	

Improvement Activities	Timelines	Resources	Status
Training and technical assistance	Ongoing	Sherlock Center on Disabilities, Transition mentors, RIPIN	Ongoing
Revision of transition forms	August 2007	Sherlock Center on Disabilities, Transition mentors, RIPIN, Lead agency staff, Part B	Completed 2/08

Revisions, <u>with Justification</u>, to Proposed Targets / Improvement Activities / Timelines / Resources for  $FFY\ 07-08$ 

Monitoring Priority: Effective General Supervision Part C / General Supervision

**Indicator #9:** General supervision system (including monitoring, complaints, hearings, etc.) identifies and corrects noncompliance as soon as possible but in no case later than one year from identification.

(20 U.S.C. 1416(a)(3)(B) and 1442)

#### Measurement:

- A. Percent of noncompliance related to monitoring priority areas and indicators corrected within one year of identification:
  - a. # of findings of noncompliance made related to priority areas.
  - b. # of corrections completed as soon as possible but in no case later than one year from identification.

Percent = b divided by a times 100.

For any noncompliance not corrected within one year of identification, describe what actions, including technical assistance and/or enforcement that the State has taken.

- B. Percent of noncompliance related to areas not included in the above monitoring priority areas and indicators corrected within one year of identification:
  - a. # of findings of noncompliance made related to such areas.
  - b. # of corrections completed as soon as possible but in no case later than one year from identification.

Percent = b divided by a times 100.

For any noncompliance not corrected within one year of identification, describe what actions, including technical assistance and/or enforcement that the State has taken.

- C. Percent of noncompliance identified through other mechanisms (complaints, due process hearings, mediations, etc.) corrected within one year of identification:
  - a. # of EIS programs in which noncompliance was identified through other mechanisms.
  - b. # of findings of noncompliance made.
  - c. # of corrections completed as soon as possible but in no case later than one year from identification.

Percent = c divided by b times 100.

For any noncompliance not corrected within one year of identification, describe what actions, including technical assistance and/or enforcement that the State has taken.

**Data Source:** Data to be taken from State monitoring, complaints, hearings and other general supervision system components. Indicate the number of EIS programs monitored related to the monitoring priority areas and indicators and the number of EIS programs monitored related to areas not included in the monitoring priority areas and indicators.

FFY	Measurable and Rigorous Target
07-08	100%

#### Actual Data for 07-08:

- A: Percent of noncompliance related to monitoring priority areas and indicators corrected within one year of identification: 12/12 \* 100 = 100%
- B: Percent of noncompliance related to areas not included in the above monitoring priority areas and indicators corrected within one year of identification: 0/0 \* 100 = 0
- C: Percent of noncompliance identified through other mechanisms (complaints, due process hearings, mediations, etc.) corrected within one year of identification: 0/0 \* 100 = 0

# Discussion of Improvement Activities Completed <u>and Explanation of Progress or Slippage that occurred for 07-08:</u>

RI has made significant progress in the area general supervision. 12 findings of non-compliance were issued for the review period of 7/1/06-6/30/07 and were corrected within one year. Similar programmatic issues were grouped into one finding of non-compliance.

As reported within each relevant indicator, previous non-compliance was subsequently corrected, including 2 outstanding findings from FFY 04-05 and 3 outstanding findings from FFY 05-06. All findings were identified by monitoring priority areas and indicators.

Corrective action plans were required of all programs for each finding of non-compliance identified. Corrective action plan templates were provided by the State and required. Technical assistance was either offered or mandated to providers in developing effective corrective action plans. The plans include: an explanation of the factors that contributed to the noncomplaince, steps to be taken to correct the issue of non-compliance, by whom, and by when. The State followed up by requiring evidence that the steps were taken and that the issue that caused the non-compliance was corrected. The State verified correction either by on-site record reviews or by the program submitting data verification of correction. In addition, when possible, the State required te correction of all individual instances of noncompliance when possible. For timeline sensitive requirements, the State requires that the program ensure that allevaluations, services, IFSP meetings, etc. were provided, even if not within timelines.

Progress in this area can be contributed to an increase in monitoring/enforcement and technical assistance by the State for programs that had uncorrected noncompliance. The State is also more actively involved in providing individualized technical assistance to providers who have been issued a finding so that correction is more likely to occur within one year. The State has provided increased education and technical assistance related to the federal requirements of IDEA and OSEP, as well as the purpose, importance, and procedures of general supervision in RI.

Indicator/Indicator Clusters	General Supervision System Components	# of EIS Programs Issued Findings in FFY 2006 (7/1/06 to 6/30/07)	(a) # of Findings of noncompliance identified in FFY 2006 (7/1/06 to 6/30/07)	(b) # of Findings of noncompliance from (a) for which correction was verified no later than one year from identification
Percent of infants and toddlers with IFSPs who receive the early intervention services on their IFSPs in a timely manner.	Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	6	6	6
	Dispute Resolution: Complaints, Hearings	0		0
Percent of infants and toddlers with IFSPs who primarily receive early intervention services in the home or community-based	Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	0		0
settings	Dispute Resolution: Complaints, Hearings	0		0
Percent of infants and toddlers with IFSPs who demonstrate improved outcomes	Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	0		0
	Dispute Resolution: Complaints, Hearings	0		0
Percent of families     participating in Part C who     report that early intervention     services have helped the     family	Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	0		0

Indicator/Indicator Clusters	General Supervision System Components	# of EIS Programs Issued Findings in FFY 2006 (7/1/06 to 6/30/07)	(a) # of Findings of noncompliance identified in FFY 2006 (7/1/06 to 6/30/07)	(b) # of Findings of noncompliance from (a) for which correction was verified no later than one year from identification
	Dispute Resolution: Complaints, Hearings	0		0
5. Percent of infants and toddlers birth to 1 with IFSPs	Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	0		0
6. Percent of infants and toddlers birth to 3 with IFSPs	Dispute Resolution: Complaints, Hearings	0		0
7. Percent of eligible infants and toddlers with IFSPs for whom an evaluation and assessment and an initial IFSP meeting were conducted within Part C's	Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	4	4	4
45-day timeline.	Dispute Resolution: Complaints, Hearings	0		0
8. Percent of all children exiting Part C who received timely transition planning to support the child's transition to preschool and	Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	0		0

Indicator/Indicator Clusters		General Supervision System Components	# of EIS Programs Issued Findings in FFY 2006 (7/1/06 to 6/30/07)	(a) # of Findings of noncompliance identified in FFY 2006 (7/1/06 to 6/30/07)	(b) # of Findings of noncompliance from (a) for which correction was verified no later than one year from identification
	other appropriate community services by their third birthday including:  A. IFSPs with transition	Dispute Resolution: Complaints, Hearings	0		0
	steps and services;				
8.	Percent of all children exiting Part C who received timely transition planning to support the child's transition to preschool and other appropriate	Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	1	1	1
	community services by their third birthday including:	Dispute Resolution: Complaints, Hearings	0		0
	B. Notification to LEA, if child potentially eligible for Part B				
8.	Percent of all children exiting Part C who received timely transition planning to support the child's transition to preschool and	Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	1	1	1

Indicator/Indicator Clusters	General Supervision System Components	# of EIS Programs Issued Findings in FFY 2006 (7/1/06 to 6/30/07)	(a) # of Findings of noncompliance identified in FFY 2006 (7/1/06 to 6/30/07)	(b) # of Findings of noncompliance from (a) for which correction was verified no later than one year from identification
other appropriate community services by their third birthday including:	Dispute Resolution: Complaints, Hearings	0		0
C. Transition conference, if child potentially eligible for Part B.				
OTHER AREAS OF NONCOMPLIANCE:	Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	0		0
	Dispute Resolution: Complaints, Hearings	0		0
OTHER AREAS OF NONCOMPLIANCE:	Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	0		0
	Dispute Resolution: Complaints, Hearings	0		0
OTHER AREAS OF NONCOMPLIANCE:	Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	0		0

Indicator/Indicator Clusters	General Supervision System Components	# of EIS Programs Issued Findings in FFY 2006 (7/1/06 to 6/30/07)	(a) # of Findings of noncompliance identified in FFY 2006 (7/1/06 to 6/30/07)	(b) # of Findings of noncompliance from (a) for which correction was verified no later than one year from identification
	Dispute Resolution: Complaints, Hearings	0		0
Sum the numbers down Column a and Column b			12	12

Percentage of non-compliance corrected within one year of identification: 12/12 \* 100 = 100%

Describe the address determine who occurred (in which is a second s	n of Non-Compliance analysis that the state did to ere the noncompliance which EI programs);	Description     desk audit of all programs (state-wide EI data system)     program self-assessment of IDEA requirements with state-defined set of children/records     site-based focused monitoring for data verification (record reviews)     Formalization of Data Review Committee and monthly meetings for review/analysis/technical assistance planning.
determining w	state's process for why that noncompliance at state level and local	<ul> <li>program self-assessment, including explanation of factors that contributed to non-compliance</li> <li>site-based discussion of root cause(s) with program management staff</li> <li>comparison of data across programs/over time periods</li> <li>disaggregation of data by service/time periods/provider</li> <li>program surveys re: staff recruitment/retention issues</li> </ul>
	the state did to require El evise policies, procedures or eeded);	Corrective action plans on state required template

Correction of Non-Compliance	Description
Explain how the state collected data to verify that the noncompliance was corrected	<ul> <li>desk audit of targeted program data</li> <li>required evidence that steps in corrective action plan were taken</li> <li>on-site record reviews</li> <li>program data reports (following program staff training, policy revision, etc.)</li> </ul>
<ol> <li>Describe any enforcement actions that the state took for any El programs that did not correct noncompliance in a timely manner (within one year).</li> </ol>	<ul> <li>mandated monthly data reporting</li> <li>monthly on-site data review meetings</li> <li>mandatory technical assistance to appropriate management staff</li> <li>mandatory clarification/change of program policy/practice</li> </ul>
Program-specific follow-up activities related to uncorrected non-compliance	See specific indicators for details on program specific activities.

Improvement Activities	Timelines	Resources	Status
Implementation of Certification Standards	1/06	Lead agency staff, Sherlock Center on Disabilities	Completed
Monthly data review and analysis for state and individual programs	Ongoing	Sherlock Center on Disabilities, providers, lead agency staff	Ongoing
Notification of findings and requirement for corrective action plans	Annually in December	Lead agency staff	Ongoing
Training and technical assistance	Ongoing	Sherlock Center on Disabilities, Lead agency staff, providers	Ongoing

Revisions,  $\underline{\text{with Justification}}$ , to Proposed Targets / Improvement Activities / Timelines / Resources for 07-08:

N/A

Monitoring Priority: Effective General Supervision Part C / General Supervision

**Indicator #10**: Percent of signed written complaints with reports issued that were resolved within 60-day timeline or a timeline extended for exceptional circumstances with respect to a particular complaint.

(20 U.S.C. 1416(a)(3)(B) and 1442)

#### Measurement:

Percent = (1.1(b) + 1.1(c)) divided by (1.1) times 100. **Data Source:** Data collected on Part C Attachment 1.

FFY	Measurable and Rigorous Target
07-08	100%

#### Actual Data for 07-08:

No signed written formal complaints were filed. See attached Table 4.

Discussion of Improvement Activities Completed <u>and Explanation of Progress or Slippage that occurred for 07-08:</u>

Not Applicable

Revisions, <u>with Justification</u>, to Proposed Targets / Improvement Activities / Timelines / Resources for 07-08:

Monitoring Priority: Effective General Supervision Part C / General Supervision

**Indicator #11:** Percent of fully adjudicated due process hearing requests that were fully adjudicated within the applicable timeline.

(20 U.S.C. 1416(a)(3)(B) and 1442)

#### Measurement:

Percent = (3.2(a) + 3.2(b)) divided by (3.2) times 100. **Data Source:** Data collected on Part C Attachment 1.

FFY	Measurable and Rigorous Target
07-08	100%

#### **Actual Target Data for 07-08:**

No signed written formal complaints were filed. See attached Table 4.

Discussion of Improvement Activities Completed <u>and Explanation of Progress or Slippage that occurred for 07-08:</u>

Not Applicable

Revisions, <u>with Justification</u>, to Proposed Targets / Improvement Activities / Timelines / Resources for 07-08:

Monitoring Priority: Effective General Supervision Part C / General Supervision

**Indicator #12:** Percent of hearing requests that went to resolution sessions that were resolved through resolution session settlement agreements (applicable if Part B due process procedures are adopted).

(20 U.S.C. 1416(a)(3)(B) and 1442)

**Measurement:** Percent = 3.1(a) divided by (3.1) times 100.

Data Source: Data collected on Part C Attachment 1.

FFY	Measurable and Rigorous Target
07-08	100%

#### **Actual Target Data for 07-08:**

Part B due process procedures are not utilized by Rhode Island DHS.

Discussion of Improvement Activities Completed <u>and Explanation of Progress or Slippage that occurred for 07-08:</u>

Not Applicable

Revisions, <u>with Justification</u>, to Proposed Targets / Improvement Activities / Timelines / Resources for 07-08:

Monitoring Priority: Effective General Supervision Part C / General Supervision

**Indicator #13:** Percent of mediations held that resulted in mediation agreements.

(20 U.S.C. 1416(a)(3)(B) and 1442)

**Measurement:** Percent = (2.1(a)(i) + 2.1(b)(i)) divided by (2.1) times 100.

Data Source: Data collected on Part C Attachment 1

FF	Y	Measurable and Rigorous Target
07-0	08	100%

#### **Actual Target Data for 07-08:**

No signed written formal complaints were filed. See attachment for Table 4.

Discussion of Improvement Activities Completed <u>and Explanation of Progress or Slippage that occurred for 07-08:</u>

Not Applicable

Revisions, <u>with Justification</u>, to Proposed Targets / Improvement Activities / Timelines / Resources for 07-08:

Monitoring Priority: Effective General Supervision Part C / General Supervision

**Indicator #14:** State reported data (618 and State Performance Plan and Annual Performance Report) are timely and accurate.

(20 U.S.C. 1416(a)(3)(B) and 1442)

**Measurement:** State reported data, including 618 data, State performance plan, and annual performance reports, are:

- a. Submitted on or before due dates (February 1 for child count, including race and ethnicity, settings and November 1 for exiting, personnel, dispute resolution); and
- b. Accurate (describe mechanisms for ensuring accuracy).

**Data Source:** State selected data sources, including data from the State data system, as well as technical assistance and monitoring systems.

FFY	Measurable and Rigorous Target
07-08	100%

**Actual Data for 07-08: 100%** 

- A. Data has been submitted on or before February 1<sup>st</sup> for child count, including race and ethnicity, settings and November 1<sup>st</sup> for exiting, personnel and dispute resolution.
- B. DHS assures that data submitted is accurate and complete. The suggested spreadsheet was used to calculate this data and is on the next page. Focused monitoring was completed in order to ensure accuracy of data for Indicator #1 and Indicator #8.

	APR Data										
APR Indicator	Valid and Reliable	Total									
1	1	1	1	3							
2	1	1	1	3							
3	1	1	1	3							
4	1	1	1	3							
5	1	1	1	3							
6	1	1	1	3							
7	1	1	1	3							

APR Data								
APR Indicator	Valid and Reliable	Total						
8a	1	1	1	3				
8b	1	1	1	3				
8c	1	1	1	3				
9	1	1	1	3				
10	NA	NA	NA	0				
11	NA	NA	NA	0				
12	NA	NA	NA	0				
13	NA	NA	NA	0				
			Subtotal	33				
APR Score Ca	alculation			5				
<b>Grand Total</b> - (Sum of subtotal and Timely Submission Points) =				38				

	618 State-Reported Data											
Table	Timely	Compete Data	Passed Edit Check	Response to Data Note Requests	Total							
Table 1 - Child Count Due Date: 2/1/08	1	1	1	1	4							
Table 2 - Program Settings Due Date: 2/1/08	1	1	1	1	4							
Table 3 - Exiting Due Date: 11/1/08	1	1	1	1	4							

	618 State-Reported Data										
Table	Timely	Compete Data	Passed Edit Check	Response to Data Note Requests	Total						
Table 4 - Dispute Resolution Due Date: 11/1/08	1	1	1	1	4						
				Subtotal	16						
618 Score Calc	ulation		Grand Total (Subtotal X 3) =		48						

Indicator #14 Calculation								
A. APR Grand Total	38							
B. 618 Grand Total	48							
C. APR Grand Total (A) + 618 Grand Total (B) =	86							
Total N/A in APR	12							
Total N/A in 618	0							
Base	98							
D. Subtotal (C divided by 98) =	1.0							
E. Indicator Score (Subtotal D x 100) =	100							

<sup>\*</sup>Note any cell marked as NA will decrease the denominator by 1 for APR and 3 for 618

# Discussion of Improvement Activities Completed <u>and Explanation of Progress or Slippage that occurred for 07-08:</u>

This indicator was calculated based on the recommended federal guidelines. Improvement plans for each indicator can be found under the indicator. DHS staff includes a data manager. She provides individualized technical assistance related to the DHS web-based data system and collection methods. She also facilitates meetings as needed to address system issues with all programs.

Revisions, <u>with Justification</u>, to Proposed Targets / Improvement Activities / Timelines / Resources for 07-08 N/A

## **ATTACHMENT A: Family Survey**

\*Below are the questions found on our family survey. The format received by families (in PDF format) is different than what is seen here.

## Understanding your child's strengths, abilities, and special needs

☐ Your child is growing and learning. How well do you understand your child's development?

We are just beginning to understand our child's development		We have a basic understanding of our child's development, but still have a lot to learn		We have a pretty good understanding of our child's development		We understand our child's development very well
1	2	3	4	5	6	7

□ Some child	ren have specia	health needs,	a disability, o	or are delaye	d in their	development.
How much do	you know about	your child's sp	pecial needs?	•		

CHECK HERE IF YOUR CHILD DOES NOT HAVE SPECIAL NEEDS AND GO TO QUESTION 3

Right now we do not know very much		We have learned some things, but still have a lot of unanswered questions		We know a lot, but still need or want to know more		We are confident that we know most of what we need to know right now
1	2	3	4	5	6	7

□ Professionals who work with you and your child want to know if the things they do are working. Are you able to tell if your child is making progress?

Right now we can't tell if our child is making progress		We sometimes can tell if our child is making progress, but still have a lot to learn		We usually can tell if our child is making progress		We almost always can tell if our child is making progress
1	2	3	4	5	6	7

## Knowing your rights and advocating for your child

□ A variety of programs and services may be available for your child and family. Do you know what is available for your child and family?

We are just beginning to learn about the programs and services that are available		We know about some programs and services, but still have a lot to learn		We think we are aware of most available programs and services		We are very aware of the programs and services that are available
1	2	3	4	5	6	7

□ Parents often meet with professionals to plan services or activities.

How comfortable are you participating in these meetings?

Right now we are very uncomfortable participating in meeting		We are not very comfortable participating in meetings, but we do it anyway		We are pretty comfortable participating in meetings		We are very aware of our rights and know exactly what to do if we are not satisfied
1	2	3	4	5	6	7

☐ Families of children with special needs have rights, and there are things you can do if you are not satisfied. How well do you know your rights and what to do if you are not satisfied?

□ CHECK HERE IF YOUR CHILD DOES NOT HAVE SPECIAL NEEDS AND GO TO QUESTION 7

We are not sure about our rights or what to do if we are not satisfied		We understand our basic rights but are not sure about all of our options if we are not satisfied		We think we know most of our rights and what to do if we are not satisfied		We are very aware of our rights and know exactly what to do if we are not satisfied
1	2	3	4	5	6	7

## Helping your child develop and learn

□ All parents help their children develop and learn, but sometimes it is hard to know what to do. How would you describe your ability to help your child develop and learn?

We need to know a lot more about how to help our child develop and learn		We know the basics of helping our child develop and learn, but still have many questions		We feel pretty sure that we know how to help our child develop and learn		We are very sure that we know how to help our child develop and learn
1	2	3	4	5	6	7

□ All parents try to help their children learn to behave the way they would like, but sometimes it is hard to know what to do. How would you describe your ability to help your child learn to behave the way you would like?

We need to know a lot more about how to help our child behave like we want		We know the basics of helping our child behave, but still have many questions		We feel pretty sure that we know how to help our child behave		We are very sure that we know how to help our child behave
1	2	3	4	5	6	7

☐ Your family has worked with professionals to develop a plan to help your child learn new skills and behaviors. How much are you able to help your child learn or practice these new skills at home or in your community?

We have not yet started to help our child learn or practice these skills and behaviors		We have started to help our child learn and practice these skills and behaviors, but it is not a regular thing yet		We often help our child learn and practice these skills and behaviors, but it is not as regular as we would like		We regularly help our child learn and practice these skills and behaviors throughout the day
1	2	3	4	5	6	7

## Having support systems

☐ Many people feel that talking with another person helps them deal with problems or celebrate when good things happen. Does your family have someone you trust to listen and talk with you?

Right now, we really don't have anyone we can talk with about the things that are happening in our lives		We can probably find at least one person we could talk with, but are not very satisfied with the situation		We usually have other people that we can talk with about things		There are definitely people in our lives we can talk with whenever we need to
1	2	3	4	5	6	7

□ Families sometimes must rely on other people for help when they need it, for example to provide a ride, run an errand, or watch their child for a short period of time. Do you have someone you can call on when you need help with things?

Right now our family really doesn't have anyone we can call on when we need help with things		In an emergency we have people we can call on for help, but not for the everyday things		Usually there is someone that we can call on for help when we need it		We almost always have other people we can call on for help when we need it
1	2	3	4	5	6	7

☐ Most families have things they enjoy doing. How much is your family able to do the things you enjoy?

Right now it is really difficult to do any of the things we enjoy		We are able to participate in some of the things we enjoy, but not nearly as much as we would like		We are able to participate in many of the activities we enjoy		We are able to participate in almost all of the activities we enjoy
1	2	3	4	5	6	7

# **Accessing your community**

□ All children need medical care. How would you describe the medical care you have for your child right now?

We do not have the medical care we want for our child		We have some medical care, but still have a long way to go before it is what we want		We have good medical care for our child		We have excellent medical care for our child
1	2	3	4	5	6	7

□ Many families have a need for quality childcare. By this, we do not mean occasional babysitting, but regular childcare, either part-day or full-day. How would you describe the childcare you have for your child right now?

We do not have the childcare we want OR because of our child's special needs we have decided not to look for it		We have some childcare, but still have a long way to go before it is what we want		We have good childcare for our child		We have excellent childcare for our child
1	2	3	4	5	6	7

□ Many families want their child to play with other children or participate in religious, community, or social activities.

How would you describe your child's participation in these activities right now?

Right now our child does not participate in activities we want OR because of our child's special needs we have decided not to look for it		Our child participates in some social or community activities, but we have a long way to go before it is what we want		Our child has good participation in social or community activities		Our child has excellent participation in social or community activities
1	2	3	4	5	6	7

## Your feelings about early intervention

☐ To what extent has early intervention helped your family know and understand your rights?

Early intervention has not helped us know about our family's rights		Early intervention has done a good job of helping us know our family's rights		Early intervention has done a good job of helping us know our family's rights		Early intervention has done an excellent job of helping us know about our family's rights
1	2	3	4	5	6	7

☐ To what extent has early intervention helped your family effectively communicate your child's needs?

Early intervention has not helped us effectively communicate our child's needs		Early intervention has done a few things to help us effectively communicate our child's needs		Early intervention has done a good job of helping us effectively communicate our child's needs		Early intervention has done an excellent job of helping us effectively communicate our child's needs
1	2	3	4	5	6	7

□ To what extent has early intervention helped your family be able to help your child develop and learn?

Early intervention has not helped us help our child develop and learn		Early intervention has done a few things so that we can help our child develop and learn		Early intervention has done a good job of helping us help our child develop and learn		Early intervention has done an excellent job of helping us help our child develop and learns
1	2	3	4	5	6	7

# THANK YOU FOR COMPLETING THIS SURVEY!

# **ATTACHMENT B: Table 4 Report of Dispute Resolution**

U.S. DEPARTMENT OF EDUCATION OFFICE OF SPECIAL EDUCATION AND REHABILITATIVE SERVICES OFFICE OF SPECIAL EDUCATION PROGRAMS

#### TABLE 4

PAGE 1 OF 1

OMB NO.: 1820-0678

REPORT OF DISPUTE RESOLUTION UNDER PART C, OF THE INDIVIDUALS WITH DISABILITIES EDUCATION ACT 2007-08

FORM EXPIRES: 11/30/2009

STATE:\_\_Rhode Island\_\_\_

SECTION A: Written, signed complaints		
(1) Written, signed complaints total	0	
(1.1) Complaints with reports issued	0	
(a) Reports with findings	0	
(b) Reports within timeline	0	
(c) Reports within extended timelines	0	
(1.2) Complaints withdrawn or dismissed	0	
(1.3) Complaints pending	0	
(a) Complaints pending a due process hearing	0	

SECTION B: Mediation requests	
(2) Mediation requests total	0
(2.1) Mediations	
(a) Mediations related to due process	0
(i) Mediation agreements	0
(b) Mediations not related to due process	0
(i) Mediation agreements	0
(2.2) Mediations not held (including pending)	0

SECTION C: Hearing requests		
(3) Hearing requests total	0	
(3.1) Resolution meetings (For States adopted Part B Procedures)	0	
(a) Settlement agreements	0	
(3.2) Hearings (fully adjudicated) (For all states)	0	
(a) Decisions within timeline SELECT timeline used {30 day Part C, 30 day Part B, or 45 day Part B}	0	
(b) Decisions within extended timeline (only applicable if using Part B due process hearing procedures).	0	
(3.3) Resolved without a hearing	0	